

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

OCPAC

ADDRESS (number and street)

976 Pacific Avenue

☐Check if different
than previously
reported. (ACC)

Willows

CA

95988

9788

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00424358

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day
PRE-Election
Report for the:☒

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

06

03

2008

in the
State of

CA

(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

04

01

2008

through

05

14

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Kelly Lawler

Signature of Treasurer

Electronically Filed by Kelly Lawler

Date

05

17

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
OCPAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	4	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	5	1	4	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		54771.24
(b) Cash on Hand at Beginning of Reporting Period	55133.95	
(c) Total Receipts (from Line 19)	3459.48	8823.65
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	58593.43	63594.89
7. Total Disbursements (from Line 31)	2758.81	7760.27
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	55834.62	55834.62
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

OCPAC

Report Covering the Period:

From:

M M
0 4D D
0 1Y Y Y Y
2 0 0 8

To:

M M
0 5D D
1 4Y Y Y Y
2 0 0 8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	3300.00	8300.00
(i) Itemized (use Schedule A)	0.00	5.00
(ii) Unitemized	3300.00	8305.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	3300.00	8305.00
12. Transfers From Affiliated/Other Party Committees00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	159.48	518.65
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	3459.48	8823.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3459.48	8823.65

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	458.81	1460.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	458.81	1460.27
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2300.00	6300.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2758.81	7760.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2758.81	7760.27

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	3300.00	8305.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3300.00	8305.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	458.81	1460.27
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	458.81	1460.27

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 10

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

OCPAC

A.

Full Name (Last, First, Middle Initial)

David Pyle

Mailing Address 200 Baker Street E
Suite 201

City State Zip Code
Costa Mesa CA 92626-4520

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Career College

Occupation
School Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 8

Transaction ID: SA11AI-18-164-c

Amount of Each Receipt this Period

2300.00

B.

Full Name (Last, First, Middle Initial)

Mr. Fritz Hitchcock, Jr.

Mailing Address PO Box 8610

City State Zip Code
City Of Industry CA 91748-0610

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hitchcock Automotive Resources

Occupation
Auto Dealer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: SA11AI-79-163-c

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

3300.00

TOTAL This Period (last page this line number only)

3300.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 10

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

OCPAC

A.

Full Name (Last, First, Middle Initial)

Wells Fargo

Mailing Address 4850 Barranca Parkway

City

Irvine

State

CA

Zip Code

92604-1702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

518.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	0	8

Transaction ID: SA17-3-167-m

Amount of Each Receipt this Period

93.86

Interest

B.

Full Name (Last, First, Middle Initial)

Wells Fargo

Mailing Address 4850 Barranca Parkway

City

Irvine

State

CA

Zip Code

92604-1702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

518.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	0	8

Transaction ID: SA17-3-169-m

Amount of Each Receipt this Period

65.62

Interest

SUBTOTAL of Receipts This Page (optional)

159.48

TOTAL This Period (last page this line number only)

159.48

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 10

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
OCPAC

A. Full Name (Last, First, Middle Initial) Wells Fargo	Transaction ID: SB21B-3-170-e Date of Disbursement																				
Mailing Address 4850 Barranca Parkway	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	5		2	0	0	8												
City Irvine State CA Zip Code 92604-1702	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bank Fees Candidate Name	<table border="1"> <tr> <td colspan="10">53.92</td> </tr> </table>	53.92																			
53.92																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) The KAL Group	Transaction ID: SB21B-13-159-e Date of Disbursement																				
Mailing Address PO Box 984	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	0		2	0	0	8												
City Willows State CA Zip Code 95988-0984	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bookkeeping Candidate Name	<table border="1"> <tr> <td colspan="10">91.06</td> </tr> </table>	91.06																			
91.06																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) CompleteCampaigns.com	Transaction ID: SB21B-21-165-e Date of Disbursement																				
Mailing Address 610 Gateway Center Way Suite K	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	5		2	0	0	8												
City San Diego State CA Zip Code 92102-4548	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Discount Fees Candidate Name	<table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table>	50.00																			
50.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

194.98

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 10

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
OCPAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) CompleteCampaigns.com</p> <hr/> <p>Mailing Address 610 Gateway Center Way Suite K</p> <hr/> <p>City San Diego State CA Zip Code 92102-4548</p> <hr/> <p>Purpose of Disbursement Software</p> <hr/> <p>Candidate Name</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">001 Category/ Type</div> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B-21-161-e</p> <p>Date of Disbursement</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 8</div> <hr/> <p>Amount of Each Disbursement this Period</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">75.00</div>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Wells Fargo</p> <hr/> <p>Mailing Address 4850 Barranca Parkway</p> <hr/> <p>City Irvine State CA Zip Code 92604-1702</p> <hr/> <p>Purpose of Disbursement Bank Fees</p> <hr/> <p>Candidate Name</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">001 Category/ Type</div> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B-3-168-e</p> <p>Date of Disbursement</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 8</div> <hr/> <p>Amount of Each Disbursement this Period</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">54.34</div>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) The KAL Group</p> <hr/> <p>Mailing Address PO Box 984</p> <hr/> <p>City Willows State CA Zip Code 95988-0984</p> <hr/> <p>Purpose of Disbursement Bookkeeping</p> <hr/> <p>Candidate Name</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">001 Category/ Type</div> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B-13-166-e</p> <p>Date of Disbursement</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 8</div> <hr/> <p>Amount of Each Disbursement this Period</p> <div style="border: 1px solid black; padding: 2px; display: inline-block;">94.49</div>

SUBTOTAL of Disbursements This Page (optional)

223.83

TOTAL This Period (last page this line number only)

418.81

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 / 10

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
OCPAC

A.

Full Name (Last, First, Middle Initial)
McClintock for CongressMailing Address 1029 K Street
Suite 44

City Sacramento State CA Zip Code 95814-3816

Purpose of Disbursement

Candidate Name
Thomas McClintockOffice Sought: ☒ House
☐ Senate
☐ President

State: CA District: 04

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23-86-162-e

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	0	8

Amount of Each Disbursement this Period

2300.00

SUBTOTAL of Disbursements This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

2300.00